

APPLICATION FOR SCHOOL BUS CONTRACTOR'S LICENSE Please print or type CHP296 (REV 02-98) OPI 062 REASON FOR APPLICATION Duplicate-license lost or destroyed (\$5.00) Initial license (\$100.00) Renewal (\$75.00) Owner change (\$100.00) Late renewal (\$100.00) Replacement-correction or change of name and/or address (No fee) APPLICANT'S NAME ATTENTION IF THIS IS A NAME CHANGE, ENTER PREVIOUS NAME TELEPHONE NUMBER (INCLUDE AREA CODE) DOING BUSINESS AS (DBA IF DIFFERENT FROM APPLICANT'S NAME) MAIN OFFICE ADDRESS CITY STATE ZIP CODE MAILING ADDRESS (IF DIFFERENT FROM MAIN OFFICE ADDRESS CITY STATE ZIP CODE LEGAL OWNER (INDIVIDUAL, PARTNERSHIP, CORPORATION OR LLC) CALIFORNIA CORPORATION NUMBER TOTAL SCHOOL BUSES OPERATED CALIFORNIA CARRIER CHP SCHOOL BUS CONTRACTOR LICENSE EXPIRATION DATE PUC AND / OR ICC NUMBER(S) IDENTIFICATION NUMBER LICENSE NUMBER CA-YES NO APPLICANT BACKGROUND a. Has the applicant ever been issued a similar license by the Department of California Highway Patrol, another state agency, another state, or the Federal Government? (Other than a renewal of this license) If "yes" explain on reverse. Has the applicant ever had any license denied, suspended, or revoked by the Department of California Highway Patrol, another state agency, another state, or the Federal Government? If "yes" explain on reverse. Has the applicant ever been a partner, officer, director or controlling shareholder in a company or corporation whose license was denied, suspended, or revoked by the Department of California Highway Patrol, another state agency, another state, or the Federal Government? If "yes" explain on reverse. d. Has the applicant, a partner, officer, director or controlling stockholder (if a corporation or partnership) ever been convicted of any offenses? (Traffic violations involving fines or forfeitures of bail of \$50.00 or less need not be reported) If "yes" explain on reverse. PRINT OR TYPE NAME AND TITLE OF EACH OWNER, PARTNER, OFFICER, PRINT OR TYPE THE NAME OF EACH CALIFORNIA SCHOOL DISTRICT, INCLUDING COUNTY LOCATION, FOR WHOM YOU PROVIDE CONTRACTED SERVICE. DIRECTOR OR CONTROLLING SHAREHOLDER. **CERTIFICATION AND APPLICANT'S SIGNATURE** It is agreed that the licensed activity will be conducted in compliance with all applicable laws and regulations, and that the applicant is aware of all applicable California laws and regulations pertaining to motor carrier safety and hazardous materials transportation. It is understood that violation of any law or regulation may result in the filing of a criminal action in a court of law or the filing of an administrative action to suspend or revoke the license. It is also understood that misrepresentation of a material fact in conjunction with this application is a misdemeanor of the California Vehicle Code and may result in denial or revocation of the license. SIGNATURE OF AUTHORIZED REPRESENTATIVE PRINT OR TYPE NAME AND TITLE DATE CHP ACCOUNTING USE ONLY CHP LICENSING UNIT USE ONLY DATE AMOUNT LICENSE NUMBER LOCATION CODE ISSUE DATE EXPIRATION DATE CASHIER CHECK DATE CHECK NUMBER CA NUMBER CONTROL NUMBER LICENSEE NAME AND MAILING ADDRESS INSTRUCTIONS TO APPLICANT MAIL THE ORIGINAL COMPLETED FORM(S) WITH REQUIRED FEE TO: CALIFORNIA HIGHWAY PATROL

ATTENTION:

P.O. BOX 942902

SACRAMENTO, CA. 94298-2902